

Vaccination Appointment Guide



Vaccination Appointment Guide

The District of Columbia Department of Health (DC Health) continues to make progress with our COVID-19 vaccine distribution planning. We are working with the federal government and local partners within the District to plan for the distribution of the COVID-19 vaccine as doses become available.

In order to receive the vaccine, you must register for an appointment. Please use the following guide to help you through the process of registering for an appointment online.

Before you start:


Before beginning registration, visit vaccinate.dc.gov to confirm you are in the current priority group.

You will be asked for your email to send your appointment confirmation, please be sure to have an email that you have access to prior to registering.


If you are unable to access the online vaccine portal or do not have internet access, please call the District's call center at 855-363-0333, for assistance with vaccine registration.

From vaccinate.dc.gov click the blue "Proceed to Vaccination Registration Portal" button to start.

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Vaccination Registration




GOVERNMENT OF THE
DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

Thank you for your interest in registering with our vaccination portal. At this moment, **vaccination appointments are only available for workers in health care settings and District residents 65 years of age and older.** To schedule an appointment, please read the information below and then proceed to the required questionnaire. For assistance call the District's call center at 855-363-0333, Monday through Friday from 8 am to 7pm and Saturday from 8 am to 4 pm.

If you do not work in a health care setting or not a District residents 65 years of age and older, [submit your email address or mobile phone #](#) and you will receive an email or text message when the registry opens to additional populations.

Thank you again. Together, we will save lives and end this pandemic.



If you work for any of the below listed institutions, please exit this questionnaire and contact your facility for specific instructions on how to get vaccinated.


- DC Health
- DC Fire and EMS
- HSC Pediatric Center
- Howard University Hospital
- MedStar Georgetown University Hospital
- Medstar Washington Hospital Center
- Psychiatric Institute of Washington
- St. Elizabeths Hospital
- The George Washington University Hospital
- United Medical Center

- Children's National Hospital
- Kaiser Permanente
- National Rehabilitation Hospital
- Sibley Memorial Hospital
- Unity Healthcare
- Community of Hope
- Mary's Center
- Giant Pharmacy
- Bread for the City
- Safeway Pharmacy

Schedule an Appointment

Please Note: This system is currently open only for people working in health care settings. You MUST provide verification of your eligibility at the time of your vaccination.

[Proceed to Vaccination Registration Portal](#)

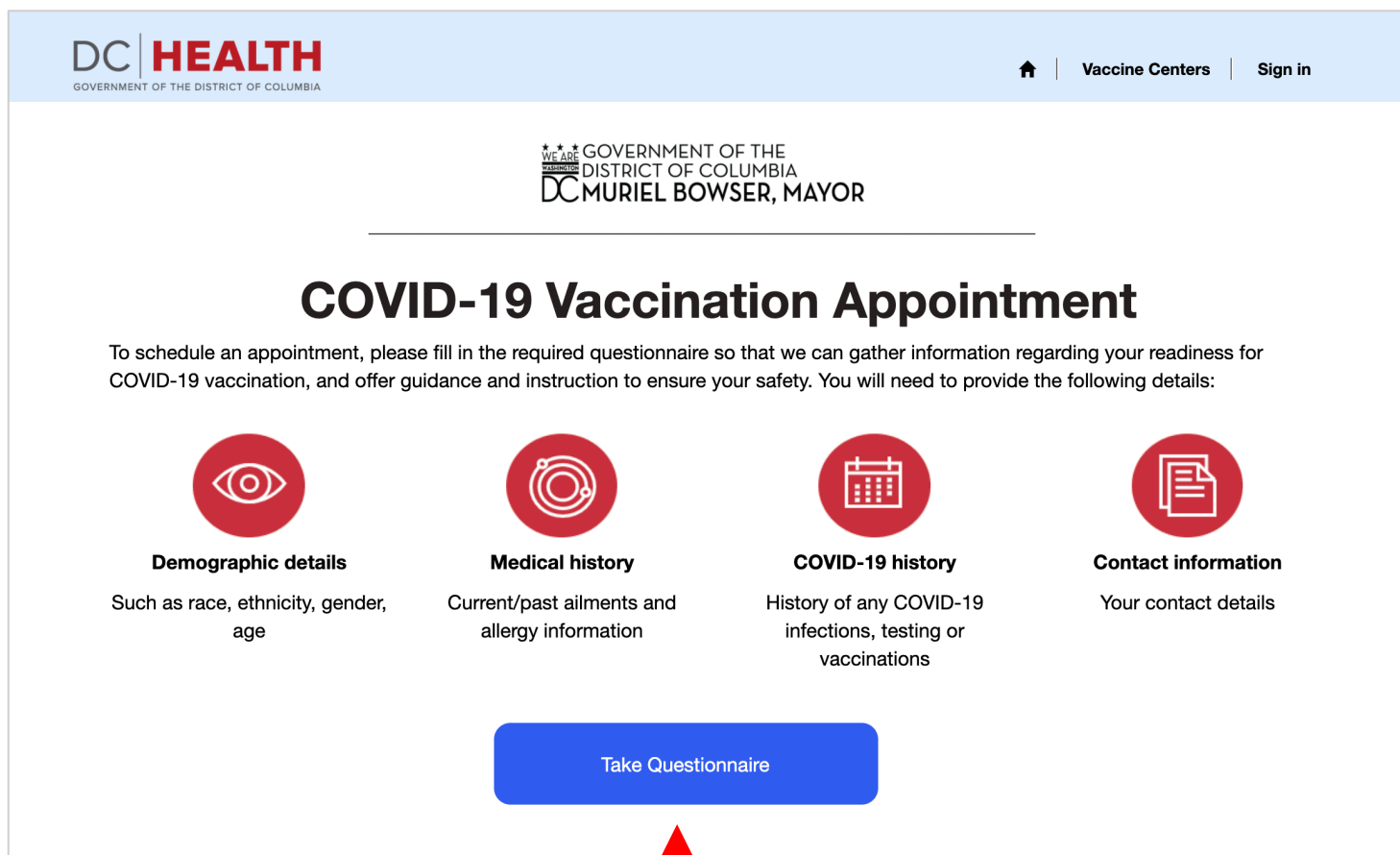


[Sign up to get vaccine updates here #](#)



Note: For best experience, please use a modern web browser such as Chrome, Safari, Edge, or Firefox. Internet Explorer will not work. Your computer should also be using the following operating system: Windows 7, 8.1, 10 and above and iOS Leopard and above (Version 11).

1. **You are now on the COVID-19 Appointment Portal.** Please review and gather the information needed to make an appointment.



The screenshot shows the DC Health website's COVID-19 Vaccination Appointment portal. At the top is a light blue header with the DC Health logo and navigation links for home, vaccine centers, and sign in. Below the header is the DC Government logo and Mayor Muriel Bowser's name. The main heading is "COVID-19 Vaccination Appointment". A paragraph explains that users must fill out a questionnaire to schedule an appointment, listing required details: demographic information (race, ethnicity, gender, age), medical history (current/past ailments and allergies), COVID-19 history (infections, testing, vaccinations), and contact information. Below these details are four red circular icons: an eye for demographics, a medical cross for medical history, a calendar for COVID-19 history, and a document for contact information. At the bottom center is a large blue button labeled "Take Questionnaire". A red arrow points from below the page up to this button.





DC **HEALTH**
GOVERNMENT OF THE DISTRICT OF COLUMBIA

HOME | Vaccine Centers | Sign in

WE ARE DISTRICT OF COLUMBIA
GOVERNMENT OF THE DISTRICT OF COLUMBIA
DC MURIEL BOWSER, MAYOR

COVID-19 Vaccination Appointment

To schedule an appointment, please fill in the required questionnaire so that we can gather information regarding your readiness for COVID-19 vaccination, and offer guidance and instruction to ensure your safety. You will need to provide the following details:

- **Demographic details**
Such as race, ethnicity, gender, age
- **Medical history**
Current/past ailments and allergy information
- **COVID-19 history**
History of any COVID-19 infections, testing or vaccinations
- **Contact information**
Your contact details

Take Questionnaire

Click the blue "Take Questionnaire" Button.

2. Fill out the CAPTCHA. Type the letters and numbers as you see them in the image. Press the "Next" button.

What is a CAPTCHA? A CAPTCHA is a type test used in computing to determine whether or not the user is human or a bot.



If it's hard to see the letters, click the words "**Play the audio code**". You will hear some words and/or numbers. Type the number(s) and/or the first letter of each word you hear.

In the example picture above there is the code pW2TQmz, so this is what you would hear: papa whiskey 2 tango queen mike zulu.

You will type pw2tqmz

When you type in the letters, it does not matter if they are capital (M) or lowercase (m). Click the blue "Next" button.

If you cannot hear the words, make sure the volume on your computer, tablet or phone is loud enough.

3. **Begin answering the questionnaire.** Click the arrow (▼) on the right hand side of each box. You will see several choices. Pick the one that is true for you.

Please complete all of the questions that have a red **asterisk***

This questionnaire is designed to gather information regarding your readiness for COVID-19 instruction to ensure your safety.

16%

Are you a District Resident or Work in the District of Columbia? *

District Resident ▼

Do you work in one of the following settings? *

No, I do not ▼

If you selected any of the above, you must bring verification to your appointment (work ID badge, provider license, pay stub or other means of verification).

Please Note: For District residents aged 65 and older, you do not need to bring a work ID badge, letter from your employer, or a pay stub to your appointment. This is a note meant for health care workers part of phase 1a.

Click the blue "Next" button to continue.

Are you required to report in to work in Person? *

No

Do you have a high risk or chronic medical condition as determined by your healthcare provider? *

[High Risk Details](#)

Yes

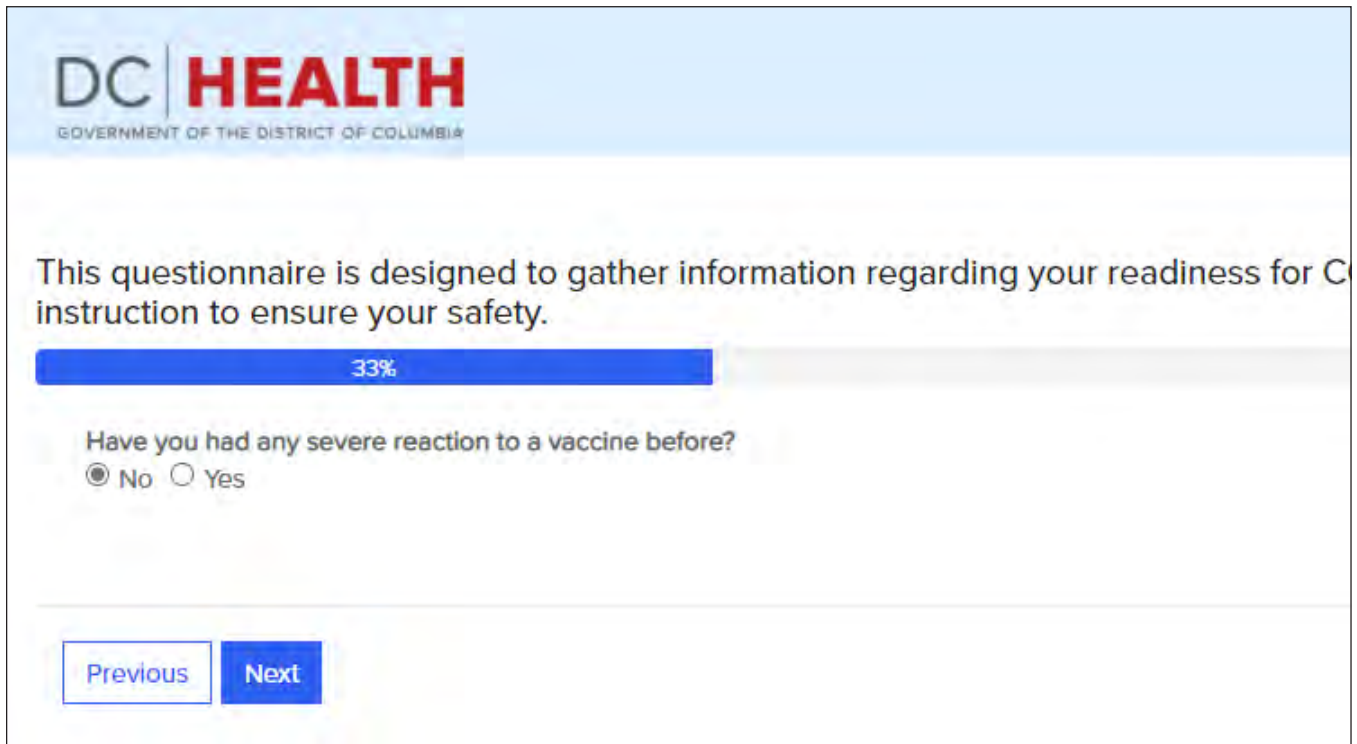
Previous Next

If you're not sure you have a high risk or chronic medical condition, click the words "High Risk Details" and look at the list of medical conditions that appears. If you see your condition on that list, click "Yes".

Please complete all of the questions that have a red asterisk *

Click the blue "Next" button to continue.

4. If you have not gotten sick before when you had a vaccine, answer “No”.



The screenshot shows the DC Health logo at the top left, with the text "GOVERNMENT OF THE DISTRICT OF COLUMBIA" below it. The main heading reads "This questionnaire is designed to gather information regarding your readiness for COVID-19 vaccination. Please follow the instructions to ensure your safety." Below this is a progress bar showing 33% completion. The question is "Have you had any severe reaction to a vaccine before?" with radio button options for "No" (selected) and "Yes". At the bottom are "Previous" and "Next" buttons.

DC | **HEALTH**
GOVERNMENT OF THE DISTRICT OF COLUMBIA

This questionnaire is designed to gather information regarding your readiness for COVID-19 vaccination. Please follow the instructions to ensure your safety.

33%

Have you had any severe reaction to a vaccine before?

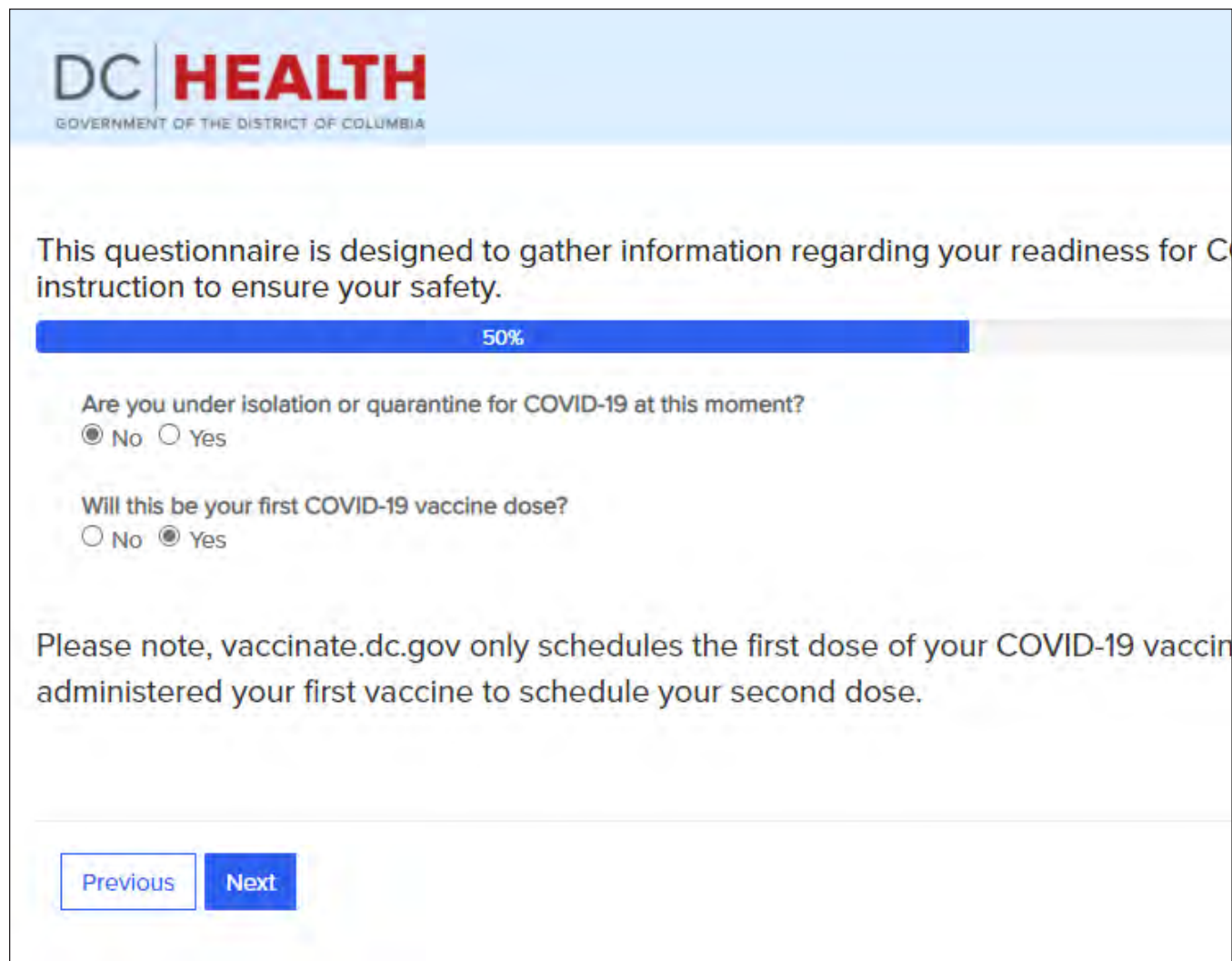
☒ No ☐ Yes

Previous Next

Click the blue “**Next**” button to continue.

5. If the doctor has not told you to stay home or away from other people because you have COVID-19 or another sickness, answer “No”. If the doctor has told you to stay home or away from other people because you have COVID-19 or another sickness, answer “Yes”.

If this is the first time you have had a COVID-19 vaccination, answer “Yes”. If this is not the first time you have had a COVID-19 vaccination, answer “No”.



The screenshot shows the DC Health questionnaire interface. At the top is the DC Health logo with the text "GOVERNMENT OF THE DISTRICT OF COLUMBIA". Below the logo, a message states: "This questionnaire is designed to gather information regarding your readiness for COVID-19 vaccination. Please follow the instruction to ensure your safety." A progress bar indicates 50% completion. Two questions are visible: "Are you under isolation or quarantine for COVID-19 at this moment?" with radio buttons for "No" (selected) and "Yes"; and "Will this be your first COVID-19 vaccine dose?" with radio buttons for "No" and "Yes" (selected). A note below the questions says: "Please note, vaccinate.dc.gov only schedules the first dose of your COVID-19 vaccination. After you are administered your first vaccine to schedule your second dose." At the bottom are "Previous" and "Next" buttons.

DC | **HEALTH**
GOVERNMENT OF THE DISTRICT OF COLUMBIA

This questionnaire is designed to gather information regarding your readiness for COVID-19 vaccination. Please follow the instruction to ensure your safety.

50%

Are you under isolation or quarantine for COVID-19 at this moment?
☒ No ☐ Yes


Will this be your first COVID-19 vaccine dose?
☐ No ☒ Yes

Please note, vaccinate.dc.gov only schedules the first dose of your COVID-19 vaccination. After you are administered your first vaccine to schedule your second dose.

[Previous](#) [Next](#)

Click the blue “**Next**” button to continue.

6. Type in your: First Name, Last Name, your Address, Email Address and Phone Number.



GOVERNMENT OF THE DISTRICT OF COLUMBIA

This questionnaire is designed to gather information regarding your readiness for COVID-19 instruction to ensure your safety.

66%

Resident Information Collection

Please provide your information below.

First Name *

Middle Name

Last Name *

Address (search for and select your address here) *

Apartment, Suite, Unit Number

Email Address *

Phone Number *

7. Select your: gender, race, ethnicity, birth month, day, and year, and insurance info.

Gender *

Race *

If other race, please specify

Please describe your ethnicity *

Please provide your date of birth

Month *

Day *

Year *

Insurance Information

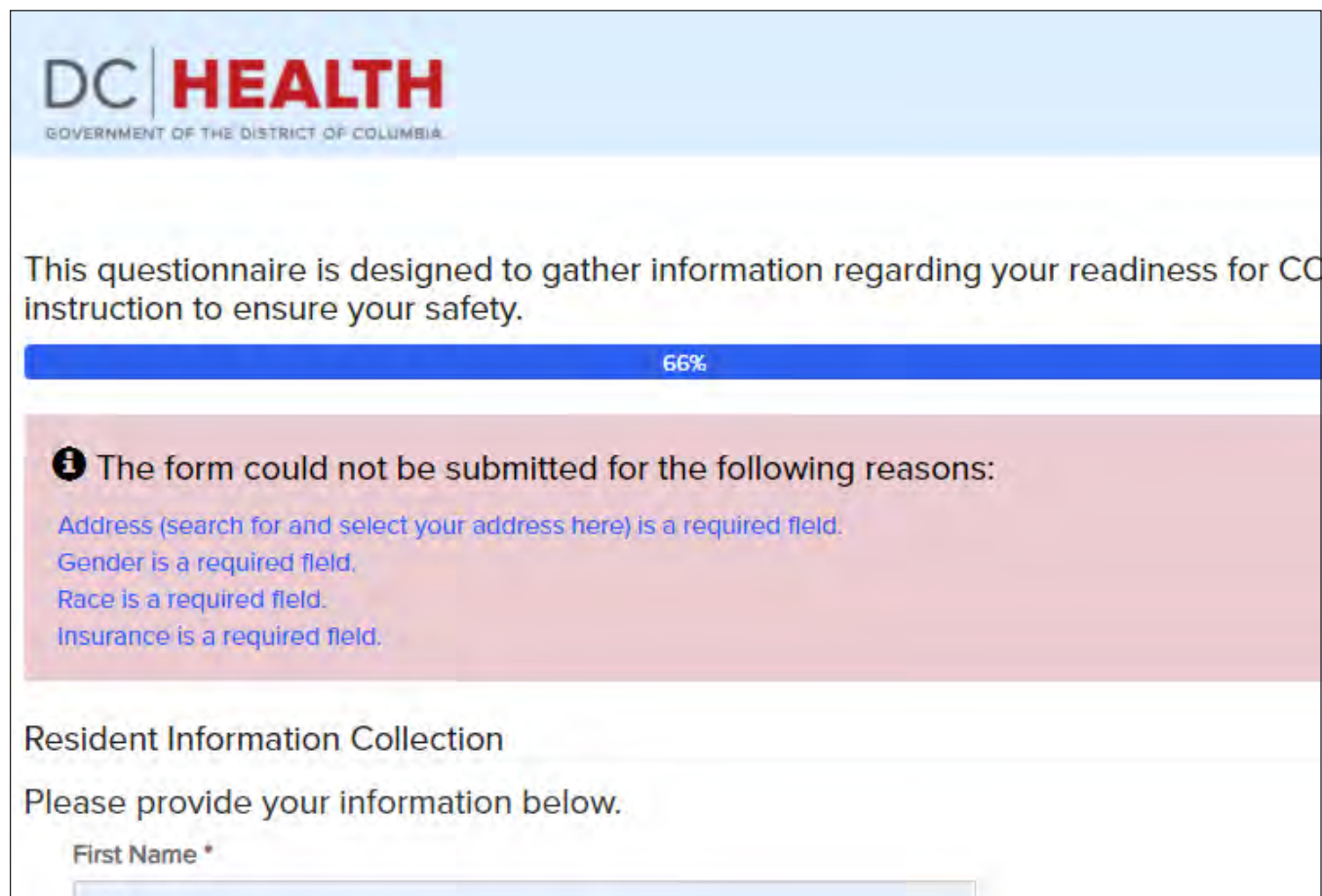
Insurance *

Click the blue “Next” button at the bottom of the page.

Previous

Next

8. If you have forgotten to complete a required question or a question wasn't answered correctly, a pink box will appear and give you instructions for correcting.



DC | **HEALTH**
GOVERNMENT OF THE DISTRICT OF COLUMBIA

This questionnaire is designed to gather information regarding your readiness for COVID-19 instruction to ensure your safety.

66%

i The form could not be submitted for the following reasons:

- Address (search for and select your address here) is a required field.
- Gender is a required field.
- Race is a required field.
- Insurance is a required field.

Resident Information Collection

Please provide your information below.

First Name *

After you make any corrections, **click** the blue “**Next**” button to continue.



[Previous](#) [Next](#)

9. You will be prompted to verify the information. Check the form to make sure everything is correct.

The screenshot shows the DC Health website header with the logo and a home icon. The main content area has a blue progress bar at 83%. Below the progress bar, it says "Please verify your information below." and "Basic Information & Symptoms". There are three questions with radio button options:

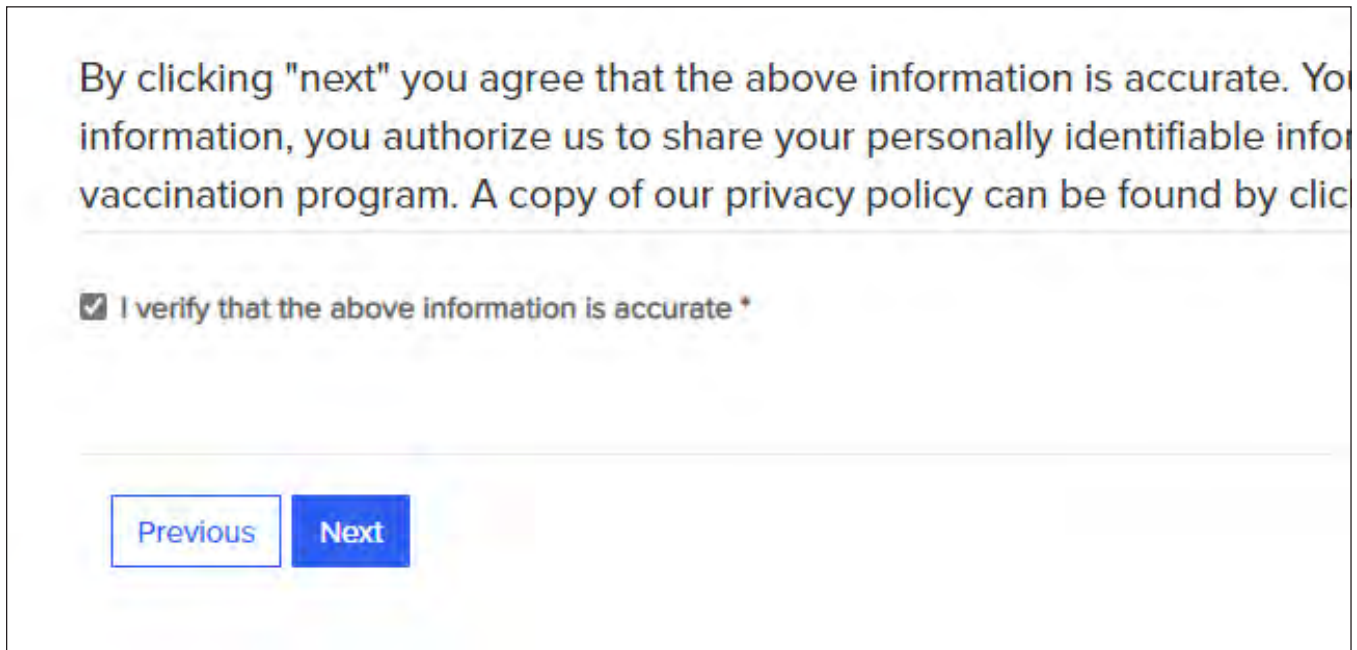
- Have you had any severe reaction to a vaccine before?
☒ No ☐ Yes
- Under isolation for COVID-19?
☒ No ☐ Yes
- Is this your first vaccine dose?
☐ No ☒ Yes

If the information is correct, **click** the small **box** near the words “**I verify that the above information is accurate**”.

Click the blue “**Next**” button at the bottom of the page.

The screenshot shows the bottom of the questionnaire. It contains a paragraph of text about agreeing to the privacy policy. Below the text is a checkbox labeled "I verify that the above information is accurate *". A red arrow points to this checkbox. At the bottom, there are two buttons: "Previous" and "Next".

10. If the information is not correct, click the white “Previous” button at the bottom of the screen. You can then return to your form and make changes.



By clicking "next" you agree that the above information is accurate. You authorize us to share your personally identifiable information with the vaccination program. A copy of our privacy policy can be found by clicking the link below.

☒ I verify that the above information is accurate *

[Previous](#) [Next](#)

Once the information is correct, click the small box near the words “I verify that the above information is accurate”.

Click the blue **“Next”** button at the bottom of the page.

11. Find a location. On this page you will look at locations offering vaccines and choose one that work for you.

DC HEALTH

GOVERNMENT OF THE DISTRICT OF COLUMBIA

🏠

Vaccine Centers

Sign in

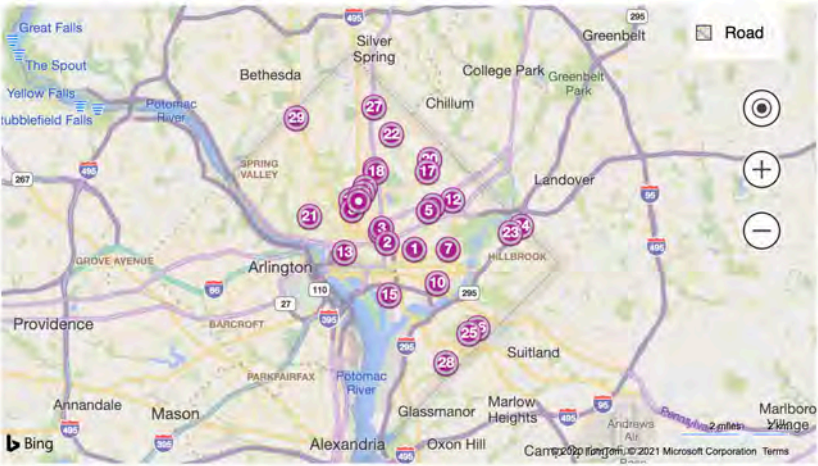
If appointments are NOT available, please go back and select other centers. If no other centers are available, please sign up to [be alerted when more appointments are available](#).

Covid-19 vaccinations will be made available in phases to ensure those populations most at risk are prioritized. Based upon your current status, you are currently eligible to schedule your appointment for vaccination. Please select a COVID Vaccination Location by clicking on the name from the list below.

Welcome Nina Test

Search for location near 2601 16th St NW, Washir within 25 miles

Search



1. Giant Food #2381 0.6 miles

300 H St NE Washington, DC 20002

Get Directions

2. Safeway Pharmacy #2737 0.6 miles

490 L St NW Washington, DC 20001

Get Directions

3. Bread for the City - Medical Clinic 0.8 miles

1525 7th St NW Washington, DC 20001

Get Directions

4. Giant Food #2376 0.8 miles

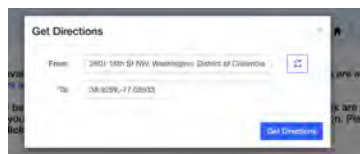
1400 7th St NW Washington, DC 20001

Get Directions

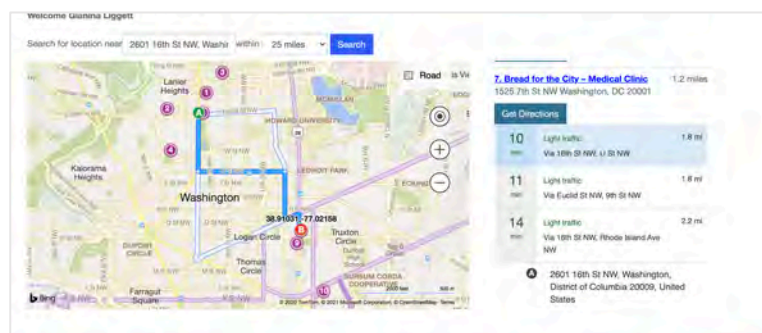
Use the map to see locations in proximity to you. The numbers correlate to the list of locations on the right side of the screen.

Click the hyperlinked name of the location to open a new page with available appointments.

Click the Get Directions button under a location to generate a map from where you are to the appointment address.



Check your address and click "Get Directions"



12. **Select an appointment.** Once you select your location, you will see a list of available appointments. Click “Book” to make your appointment.

If appointments are NOT available, please go back and select other centers. If no other centers are available, please sign up to [be alerted when more appointments are available](#).

Please confirm your booking within : 170 seconds

Date Range

Apply

Back

Resource ↑	Start Time	End Time	Duration	
Bread for the City – Medical Clinic	1/16/2021 11:00 AM	1/16/2021 12:00 PM	60	Book
Bread for the City – Medical Clinic	1/16/2021 12:00 PM	1/16/2021 1:00 PM	60	Book
Bread for the City – Medical Clinic	1/16/2021 1:00 PM	1/16/2021 2:00 PM	60	Book
Bread for the City – Medical Clinic	1/16/2021 4:00 PM	1/16/2021 5:00 PM	60	Book
Bread for the City – Medical Clinic	1/17/2021 9:00 AM	1/17/2021 10:00 AM	60	Book
Bread for the City – Medical Clinic	1/17/2021 10:00 AM	1/17/2021 11:00 AM	60	Book

Next you are asked to confirm your name, date of birth, and appointment location, date and time.

Please complete another CAPTCHA **to ensure you are not a robot.** If you cannot see the graphic, select “Play Audio Code”

Please confirm your booking within : 150 seconds

Please review your appointment [before submitting.](#)

Name
Sylvia Murph

Gianina Liggett

DOB
6/4/1940

Vaccination Location *
Bread for the City – Medical Clinic

Start Time *
1/16/2021 4:00 PM

End Time *
1/16/2021 5:00 PM

Please enter the code you see below and then click Submit.

[Generate a new image](#)
[Play the audio code](#)

Enter the code from the image

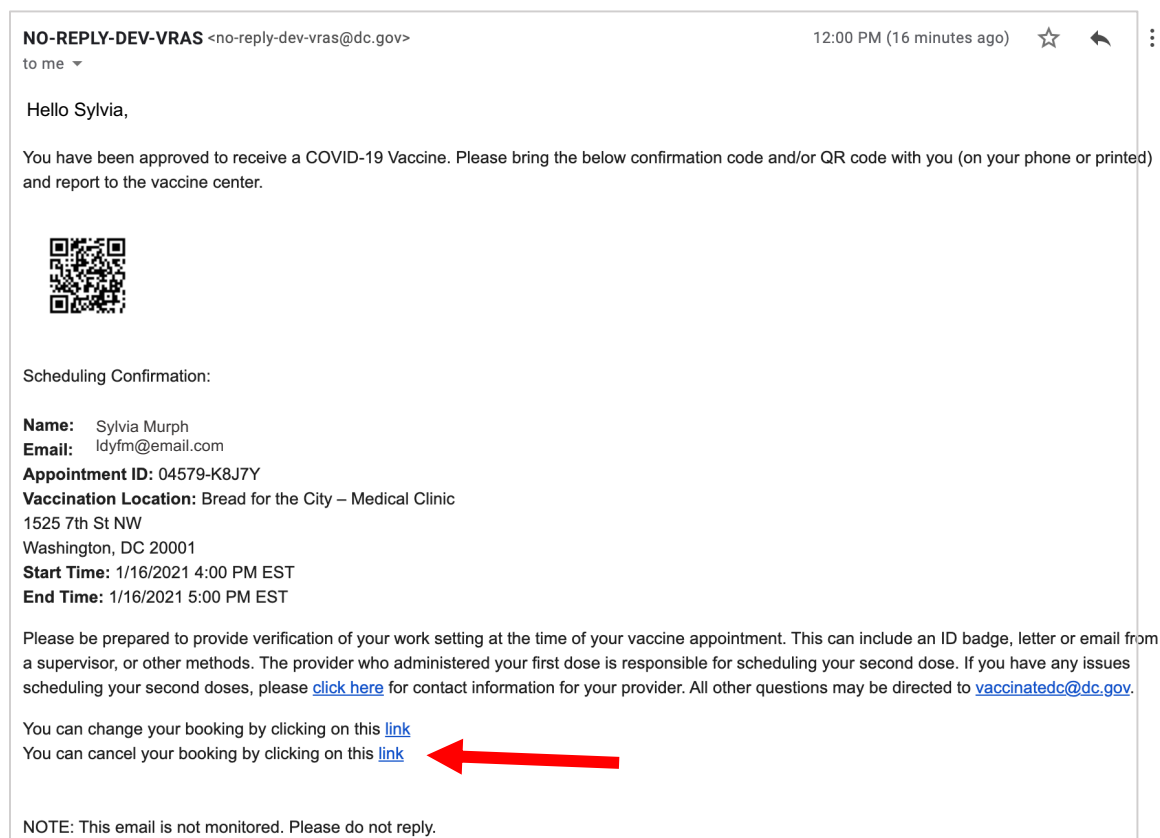
[Submit](#) [Back](#)

Email Confirmation

After successfully booked, you will see this confirmation message. Please check your email for a confirmation with full details.



The subject of the email is: **COVID Vaccine Notification - Booking Confirmation.** Be sure to check your SPAM or JUNK folder. After 20 minutes, if you are unable to find the email, please email vaccinatedc@dc.gov for assistance.



Cancel Your Appointment

If you need to cancel or change your appointment, open your confirmation email for the appointment and select the link underneath "You can cancel your booking by clicking on this link".

Cancelling Your Appointment Continued

Confirm your date of birth.



The screenshot shows a mobile application interface on a smartphone. At the top, the status bar displays the time 3:19, LTE signal, and battery level. Below the status bar is a navigation bar with a back arrow and the word "Mail". The address bar shows the URL "test-vras-dc.powerappsportals.us". The main content area has a light blue header with a menu icon. Below the header, the text "Please confirm your date of birth" is displayed. There are three input fields: "Month *", "Day *", and "Year *". Each field is a text input with a dropdown arrow on the right. Below the input fields is a blue button labeled "Next".

3:19

Mail

test-vras-dc.powerappsportals.us

Please confirm your date of birth

Month *

Day *

Year *

Next

Cancelling Your Appointment Continued

Enter the code shown on the next screen.

3:19 100% LTE

test-vras-dc.powerappsportals.us

Cancel Booking

Name
Sylvia Murph

Date of Birth
6/4/1940

Appt ID
04562-T2G7M

Vaccination Location *
Bread for the City – Medical Clinic

Start Time *
1/16/2021 4:00 PM

End Time *
1/16/2021 5:00 PM

T9HJBps

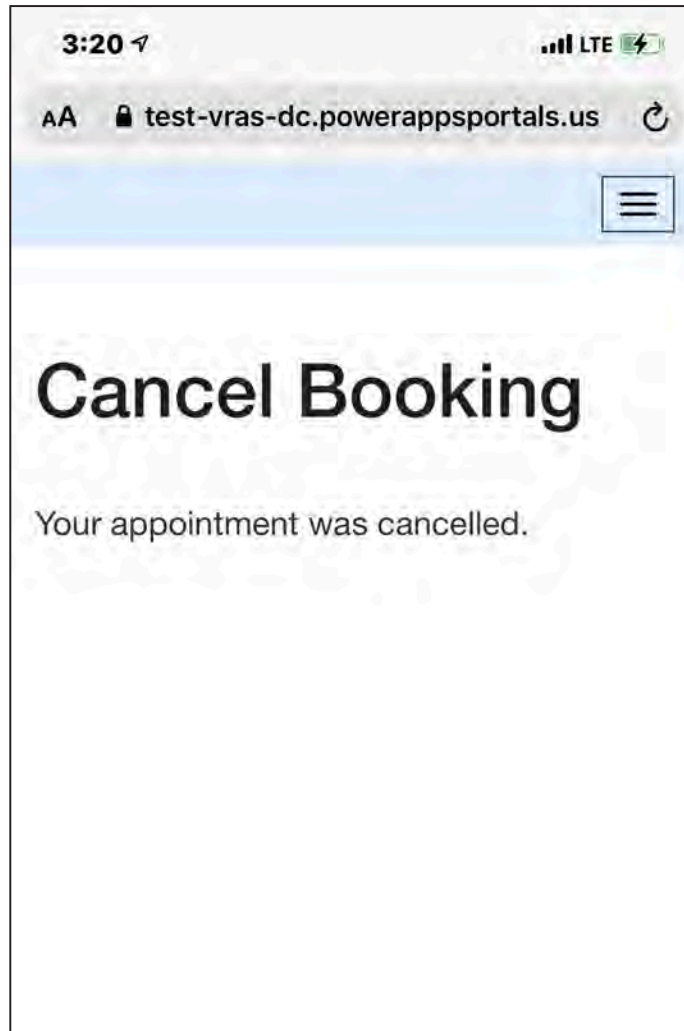
[Generate a new image](#)

[Play the audio code](#)

Enter the code from the image

Cancelling Your Appointment Continued

Your appointment has been cancelled.



If you have any difficulty or cannot find your confirmation email please email vaccinatedc@dc.gov for support. The representatives that monitor that inbox have the ability to cancel an appointment for you.

To receive alerts via email or text for future announcements or when more appointments become available go to vaccinate.dc.gov